

**Arizona Department of Education
Health & Nutrition Services
Family Child Care Homes Advisory Council
Thursday – May 28, 2009
9:00 a.m. to 11:00 a.m.
MAY MINUTES**

Kenny Barnes – Family Child Care Homes (FCCH) Advisory Council Committee Chair, called the meeting to order at 9:10 a.m.

Advisory Council Attendees:

Kenny Barnes	Arizona Department of Education
Teresa McCormack	Arizona Department of Education
Lori Mendoza	Association for Supportive Child Care
Phyllis Montgomery	Child & Adult Community Resources
Cathleen Moore	Food for Children

Not in Attendance:

Deanna Barrowdale	Mid-State Child Care & Nutrition
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Other Attendees:

Loida Baredez	Mano Amiga, Inc.
Kay Curtis	Actively Building Child Care, Inc.
Anita Griffin	Actively Building Child Care, Inc.
Julie Grimes	Nutrition & Health Education Resources
Stacey Gyenizse	Community Nutrition Resources
Angela Hilton	Nutrition & Health Education Resources
Dustin Melton	ADE
Sandee Montez	Nutrition For Children, Inc.
Mark Morgan	Child & Adult Community Resources
Katie O'Neill	BJ Enterprises
Mandy Quintanar	ADE
Cathleen Reagan	Az Association of Family Day Care Providers
Bea Sandoval	Border Community Child Care Resource Center
Valeda Shivers	BJ Enterprises
Barb Simington	ADE
Sheila Yarbor	Child & Adult Community Resources

Welcome and Introductions:

- Committee Chair welcomed Advisory Council and participating sponsoring organizations: Let's get started. Welcome and as always, glad to have you back for another Advisory Council meeting. Some of you who haven't attended meetings in the past – my name is Kenny Barnes, Cathleen Moore, Phyllis Montgomery, Lori Mendoza. Deanna Barrowdale won't be able to make it today due to a prior engagement but this is the Advisory Council Board. I do see some familiar faces out there, not sure who this young man is over here but Welcome. We do have a full agenda today and we are going to cover quite a few things in about a two- hour time span because you also have a training that is starting at 11 o'clock. I was emailed quite a few questions that want to be covered and I'm going to address all those questions. What I'm going to ask of you is any comments, any questions to those answers that you either hold them until after I'm done or just write them down

for me because I want to be able to address all the questions and give them all the appropriate responses without having to rush thru everything, okay.

Renewal Training: (K. Barnes)

- The first order of business today is the renewal training. Renewal training for you folks will be July 14th here in Phoenix and July 23rd in Tucson (9:00 am to 12:00 noon). Any items that you would like to have covered during your training either contact your specialist and let them know or if you want to email me that's fine, if you want to email Mandy back there that's fine too – but anything that you feel that you might want to address during this training that is going to be beneficial to you in the upcoming fiscal year go ahead and let us know and we'll look into it and we'll get it covered for you. Okay, another thing I want to touch on before we get into the questions. Mary Szafranski has been out sick and she is going to continue to be out for an extended period of time. We would like any questions that you have pertaining to the program whether it's something that you agree or disagree with and want to change – Mary is not responding to any emails, so any questions that you might have you contact Melissa or myself and we'll give it the proper attention. Mary needs to spend this time to focus on her rehabilitation and recuperation, okay – How long she'll be out, we're not sure, we just know it's going to be an extended period of time.
- Just so you know the questions that were emailed to me that I will address today – you will all get copies of those so you'll have the answers I'm going to give you – you'll get those in writing just so there is no miscommunication or confusion from what I'm saying and interpreting something else. All right – now on to the fun stuff. (K. Barnes)

Questions from Sandy Montez: (K. Barnes)

- Why were the sponsors 'NOT notified that there was a new manual?
 - There is no new Manual that is out – there was a revision that was made to the Manual that was effective the end of March, I believe. The revisions that were made – All you guys were notified of those changes through memos and letters from Melissa. All I did was incorporate all those into the Manual – so what was put into the Manual was not anything new, you were already aware of it. All I did was incorporate it into the Manual. So, to answer your questions there is 'no new manual' there was just revisions. The revisions were actually posted online and what I'll start doing from here on out – once I make changes because there'll be quite a few changes upcoming. Once I've made those revisions, once I've posted them online – I'll notify all the sponsors and let you know that you need to check online because there have been revisions made to the Manual – okay.
 - ADE Approval of Facilities/Homes? Paperwork now required to be submitted to our assigned specialists. Providers are now going to have to wait longer than the normal 10 working days due to the review of specialists, then the ADE CACFP Director for her approval, then waiting for an email of the beginning date of approval. Specialists could be on vacation, out sick, on a review, etc. How is this all going to be completed in a timely manner:
 - We have already set up internal procedures on how this is going to work and it will be done in a timely manner. The emails and information is going to Barb Simington – Barb will log it in and distribute to the applicable specialist. The specialist will go ahead and do there review and once it is done, it will be sent to Melissa. Melissa will assure that everything that needs to be there – is there and return the application to Barb. Barb will notify the

sponsor that the provider is either good to go or there is something missing. In the event that the specialist may be out sick, on review, maternity leave – anything like that, it will be given to another specialist so that the application is not sitting on their desk waiting for them to come back.

- Are we still giving them the 5-10 days time? (P. Montgomery)
 - We are not giving any specific time. The Regs state that we have 30-days and it's not going to take us 30-days to get this done though. This is actually on the Federal Regulations: 7CFR 226.6 B5 IV3 – The State agency notification requirements for any new or renewing institution applying for participation in the program must be notified in writing of approval or disapproval by the State agency within 30 calendar days by the State agency receipt of a complete application.
 - Can you give us a copy of the Federal Reg? (P. Montgomery)
 - Doesn't this refer to the sponsoring organization? (C. Moore)
 - That is for the Provider as well. (K. Barnes)
 - That is your interpretation? (P. Montgomery)
 - Yes – Like I said it's not going to take 30 days but that is what we have. And, as I was saying, in the event a specialist is out sick or on review, whatever like that – it will be given to another specialist for them to review. In the event that Melissa is out sick, on vacation, whatever like that – the final review will be done by me. So it will get done in a timely manner and it won't be sitting on anyone's desk and you aren't waiting around for it. (K. Barnes)
- What are you guys going to do with all of the paperwork that we sent in for each Provider that we sent in for approval? What will happen with all the documentation and paperwork that we send in for approval – I thought we were going to have a reduction of paperwork? (Sandy Montez)
 - Well, I mean – all you're doing is just sending in to make sure that the information that the Provider is supposed to have your sending in to us to making sure have I signed off on it and Melissa has signed off on it. So as far as what we're doing with it – we're just reviewing and making sure that everything that is supposed to be there is actually there. (K. Barnes)
 - So after we mail it (paperwork) and you have reviewed it then what do you do with it? (S. Montez)
 - We will either send it back to you or just notify you guys by email – we'll probably just sent it back to you, okay. (K. Barnes)
- Providers who move to a different residence: the same applies as stated in 2a? (S Montez)
 - I'll assume you're saying do they go thru the same process. (K. Barnes)
 - Well, we already have an Approval form; we already have all that information. All we would need is to get a new Fire, new Health and a new Application – Is that all that we need?
 - It will be the same thing – any Provider that is moving from Home A to Home B for whatever reason, would need the same paperwork as for a 'New Provider'. (K. Barnes)
 - But why, when we have already been approved them in the past – So now we want them to renew their fingerprinting? (C. Reagan)
 - Yes, that's just what the Reg says – Yes, it's the same thing and that's what we are going to do. (K. Barnes)
 - What Reg? (C. Reagan, K.O'Neill)
 - Okay, one more thing, will we be doing another Approval form on them? (name ?)

- The information that was on the memo that was sent out as far as what's needed – that is what we are going to need for a new Provider or from Provider moving from home to new home. (K. Barnes)
- You're not saying to redo it – you're saying to make a copy of the existing form. We aren't required to get them to sign a new pre-app and all that. When you do a move what we're doing is pulling it out of the file – I can understand if you want me to send all the other documents that we already have in file for that person, so do you want us to make a copy of that? Because if we're not required to get them to sign a new pre-approval form as if they were just starting off the first 30 days? I don't understand the requirement for a new fingerprint card? (P. Montgomery)
- Right, it says here – Reference memo recently sent, this is what was sent out and this is what we are expecting:
 - Provider application pre-approval visit
 - DES certificate if it's a DES home
 - DHS license if it's a DHS home
 - Fingerprint Clearance
 - Health Inspection
 - Fire Inspection
 - Childcare Inspection for AA homes
- That is what the State says you are required to submit and that is what we are going to expect. (K. Barnes)
- Do we have to re-do it? (C. Moore)
- We don't have a problem submitting it but what you're saying is... (P. Montgomery)
- What I'm saying is – What I'm saying it doesn't say here – What are you talking about, what are you saying? (K. Barnes)
- I'm saying that – when you have a new Provider you have all these things new. When you have an existing provider you have all these things already in file. So are we just making copies of these things that are already in file? (P. Montgomery)
- If you're not required to do that for a Provider who is moving – then I would say, just go ahead and make a copy of what you got. (K. Barnes)
- Okay, that's what we are asking. (P. Montgomery)
- That's just what is required for a 'move'. (K. Barnes)
- Question on existing Provider and information has gone to storage then what?
- In that case, then my suggestion would be to devise some sort of system where you have access to it in case the Provider does move and we need to receive it. (K. Barnes)
- Comment – You do realize that this may not always be possible?
- Okay – now, let's go thru this one more time. What is on this memo – that is what ADE will expect. All right, as far as dates whatever like that – if there is anything that you need to copy and submit to us then that is what you need to do, all right. (K. Barnes)
- What if the Provider has already applied for the program?
- If a participating Provider moves from the approved home to another residence and wishes to continue participating – all required information must be sent to ADE. The Provider must receive ADE approval for the new residence to remain on the CACFP program. The Reg for that is 7CFR 226.6 B3 okay, if you have any questions as far as what is required – I suggest you go to that site right there. It is on the memo that was sent out by Melissa. (K. Barnes)

- I was trying very hard to find that this morning and I think I need the Federal Register volume because the Federal Register has so many different versions to it. (C. Moore)
- I can get that for you. (K. Barnes)
- Okay. (C. Moore)
- Additional questions regarding this new requirement for DHS homes from various attendees.
- All right – one more time. See what's on Memo here – This is what's required of you, all right. Whether you were required in the past or not, this is what is required now. What you all need to realize that this is what's required now and this is what we expect. (K. Barnes)

Questions from Cathy Reagan: (K. Barnes)

- What is the turnaround time? We already discussed that.
- We already discussed what our internal procedures are going to be. We already discussed the steps that would be taken in the event that a Specialist or Melissa is out to make sure the process is completed in a timely manner. (K. Barnes)
- What are the criteria 'not to be rejected'?
- Simply, criteria not to get rejected are providing all the required information that is stated in the memo that you need to submit.
- We no longer need to submit Drop/ Adds to ADE?
- Yes – you have to continue to submit Drop/ Adds to ADE.
- Is there a grace period for an AA Providers renewing their Health/Fire Inspections? After questioning many sponsors the majority have been operating with 6-week grace period. This has been the common practice for years and was supported by the Policy Manual prior to 6/1/2007. The memo CACFP 05-2009 dated March 31st refers to no grace period in regards to meal patterns. We would like to clarify that CACFP regulations do not provide for claiming grace periods to new homes that fail to serve reimbursable meals. There is 'no' grace period for Providers renewing their Health/Fire Inspections. In the event that Provider is scheduled for a Health/Fire Inspection and the Inspector cancels or reschedules, those will be handled on a case by case basis. Please understand – there is 'No' 6-week grace period. Grace periods are - No longer. (K. Barnes)
- I hire all my inspectors a month ahead of time so that they can be done in a timely fashion by the inspectors. The inspectors try to get to them but this is what they have told me in the past, is that what they do is look at the inspections in Maricopa County, they look at them even though I've sent this to them a month ahead of time and if they notice somebody else's are due before mine, then he is going to do that first. And there is nothing we can do, very seldom that it goes past 20 days but it has been up to 20 and sometimes all the way up to the 5-weeks. It depends on how many he says they get in – because when they haven't called my Provider I tell my providers that if they haven't heard from them in 10 days – then you call me so that I can call them. Then when I call them the response is, "they are next on the list" – so it isn't fair for us to punish them when we put the order in. (P. Montgomery)
- And that is why I say – we will handle on a case by case basis. So you document any comments you have with the Inspector and the Provider and keep that in file. Like I said, that is handled on a case by case basis. (K. Barnes)
- And I do that – that's what I'm talking about. (P. Montgomery)
- Okay and that will be sufficient. (K. Barnes)

- If an inspection goes past its expiration date and we feel that we have documented it – Do we also need to send it on to ADE for you're to approve on a case by case? (C. Moore)
- Well, I would think something like that – it is not a situation where like for renewing Providers – I don't think it would be a situation where you'll need to send it in to us, I would think it could be kept in that Providers file and so when a Specialist comes to do their Admin Review it's in there. And especially in case if the Admin Review coincides with the expiration date when the renewal should be for the inspection. (K. Barnes)
- And will the auditors also be notified to look at it? (C. Moore)
- I'm pretty sure that with something like that they will contact us – because they always contact us when they have questions on dates or anything like that. In the event that something like that happens, you have that documentation in your file – then you can go ahead and let the auditors know that it's our policy that things like this can be handled on a case-by-case basis and that you were told to go ahead and document and maintain in your file. That either that Inspector couldn't get to that Provider or in Phyllis's situation like she said, all right. Like I said, I'm sure that they will contact us and ask us and we'll go ahead and say yes. (K. Barnes)
- Now are you saying when a Provider moves – she can't claim on the food program until a new health inspection, a new fire inspection and ADE approval which could be weeks and weeks and weeks? (C. Moore)
- As far as what our part is being weeks – it's not going to be weeks and weeks and weeks on our part. Were they the last inspection? (K. Barnes)
- They cannot claim until they have completed new inspection and the approval date is when Melissa signs off on it. All right – that is the approval date. It's just the same way like we do with our applications with the childcare centers. They can't start claiming until she actually signs off on the application. Okay. (K. Barnes)
- When would the Providers know when to start recording their menus? (C. Moore)
- Tell you what – write this stuff down – I'm going to finish going thru the questions. Let me see here and the second part to that answer was – there is no grace period for new homes that serve meals that are not reimbursable for whatever reason (missing meal component, child not signed in, prior meal counts not annotated, etc.) okay. I guess the second part of that question was – We would like to clarify that CACFP regulations do not provide for claiming grace periods to new homes that fail to serve reimbursable meals. And again, there is no grace period for new homes that serve meals that are not reimbursable for whatever reason. All right – once they are approved and start claiming and the monitoring visit is done or you get there and meal count at the end of the month, whatever like that – you see that once you review the menus that they missed a meal component or during a monitoring visit children haven't been signed in for the past three days – then those meals are disallowed. (K. Barnes)
- The grace period for Fingerprint Clearance Cards. Are 90-days still acceptable time period to get the clearance card on file after a new Provider has been fingerprinted and their application has been sent to DPS?
 - Providers must either have a valid Fingerprint Card or apply for Fingerprint Clearance Card within 7-days of employment before they receive any money. Reference Arizona Revised Statute 46-321.B.
 - Can we send you the card that we have on file? (C. Reagan)
 - Well, if they have an application. (K. Barnes)

- After they send off for their fingerprint clearance card – We understand that they have 90-days to put their actual card in the file, is that acceptable? (C. Reagan)
- I'll check on that and that answer will be included in the Minutes when they are sent out. (K. Barnes) (Still do not have an answer this question yet)
- I just want to make that this is clear. (C. Reagan)
- Okay – all the grace period questions that I can answer right now. As far as what you are talking about as far as the fingerprints and 90-days and stuff like that. That, I'll have to check, like I said – if they have an application then I'll check with Melissa and see what our position is on that. (K. Barnes)
- I also want to know, when I have one on a one on one basis – because sometimes I have some that last longer but I call in and I make sure that they are processing and get these people names in. (P. Montgomery)
- Is there a grace period when a DES/DHS home transfers to AA status? Section 505 references 45-days in the 3/31/2009 revision?
 - Again, there is no grace period. All these changes pertaining to grace periods and things like that – there is a number of revisions that will have to be made to the Manual and I plan on making those here very soon, all right. So again, be looking for these because they will be coming out within the next three to four weeks.
- DES certificate expirations – DES can be months behind in renewing DES providers because of their current caseloads. My provider Amanda Axtell in Joseph City went 11-months in good standing until her DES certificate was renewed. This is beyond the provider's control. If we document that they are in good standing per DES, can they continue to claim with an expired DES certificate?
 - DES would need to send the sponsoring organization something in writing stating that the provider is in good standing and a valid renewal certificate is forthcoming.
- Over ratio – Over ratio providers are discussed in two different sections of the Manual (Section 203 and 808). Please discuss what the policy for over ratio (in home vs. menu review) is. During menu review, we are looking at claimed meals or who is in attendance? Please advice.
 - Over ratio is just that – Over ratio whether you are doing a home monitoring visit or whether you are doing a menu review, all right.
 - During a menu review, you are looking at both claimed meals and attendance. To determine if a provider is over ratio you need to review the children in attendance and the meals claimed for those children to determine if the provider was over ratio.
 - So, over ratio is not just during a home monitoring visit – Over ratio can also be determined by either home monitoring visit or doing a menu review.
- Meal Time/ Duration – Is there still a 2-hour requirement in between meals/snacks? This isn't discussed in Section 807. Please advice. Also, the manual references approved meal duration times. Is it a requirement that Providers have a meal/snack start and end time? What section is that in?
 - All right – that specific information is not in the Manual. That is another revision that will be going into the Manual. (K. Barnes)
 - A valid meal start time is a minimum of 2-hours from the start of the previous meal. Providers are required to have start and end times. The purpose of annotating both the start and end times is to insure that meals/snacks are claimed within the acceptable duration and also to ensure that meals/snacks are starting within the 2-hours of the previous meal start time. (K. Barnes)

- Breakfast Meal times 7:30 to 9:00 am – Anytime within this time. (M. Quintanar)
- Does there have to be a break time between shifts? (Anna Burke)
- Yes, there must be a break in between shifts. You can't serve breakfast for three straight hours. You're serving two shifts – 7:00a-8:00a and 8:00a-9:00a. Right now you are serving breakfast for two straight hours. I'll check but for now I would have to say 'yes' there has to be a break in between shifts.
- Policy Manual Revision – The last revision was created the end of April 2009 but made effective 03/31/2009. I came across the revision 04/29/2009. Why was the revision not retroactive? Why do sponsors not have a 10-day comment period? Why weren't sponsors notified about the revision? Sponsors need time to train their staff and providers when revisions are made. Please give us a reasonable amount of time to comply with CACFP policy in the future – We need clear direction from ADE to be compliant for our annual program specific audits and ADE reviews.
 - We touched on this earlier this morning and from here on out – once the revision is made you'll be notified that a revision or revisions were made to the Manual and let you know that they are posted online so that you can print them off or whatever you need to do. The last changes that I made, as far as the 10-day comment period because those are Federal Regulations a 10-day comment period, honestly, isn't going to do you any good because it's not going to change – that's just the way it is. The changes that I made to the Manual pertain to grace period and the provider having to maintain records on site for 12-months. Again, those are Federal Policies, all right. Those are things not created by ADE, those are policies created by the Feds. So ADE giving you a 10-day comment period and you giving comments to us – If that's what you want that's fine but anything that is federally mandated is not going to change. So we couldn't take your comments and do anything with them because again, those are federal policies and that's what is federally mandated and we cannot change that. That is what ADE has to enforce.
 - Here's the issue – changes need to be in the Manual and so that's why it's important that it's brought to our attention and that we are given enough time to put these changes into place. It's a problem during an audit because when the auditors find out changes during the audit – Auditors go by the Manual and we don't want to be out of compliance and every single year this happens. I felt completely unprepared not knowing of policy changes. (A. Hilton)
 - You are absolutely right and like I said the last change that went out I'll take responsibility for that because first of all I didn't notify anybody and of the change – I just had it posted online. That's why I said that here on out you all will be notified of the revision probably before it gets posted online. (K. Barnes)
 - And you mentioned that with some of these policies it would be handled in a case-by-case basis – and we don't think that. It goes back to updating the Policy Manual and that's it. (A. Hilton)
 - This is something you should put on their training thing when auditors come in because they say they come in and get training. Maybe this is an issue you need to bring up. (P. Montgomery)
 - I'm not sure what to tell you but I know I haven't trained anyone – this is the first time I'm hearing about this. I want everyone to listen up when I tell you, I have been here over five years and at no point have I trained John C. Todd or Heinfeld, Meech and Company or whoever else is out there with an Auditor badge. So when they say they come to us – that not correct. (K. Barnes)

- Well everything they are picking up – they are pulling it from where? These rules that they come with to us and that we don't have in the policy book – where are they getting them from? (P. Montgomery)
- I don't know – I know a lot of times it's the same things that they have questions on and I've gotten several phone calls over the past 3-4 weeks when the auditing thing was going on for some of you guys. I got quite a few questions from some of the auditors asking for clarification of what they need to do to make sure that they needed to disallow a meal they did and if they didn't need to disallow a meal they didn't and things like that. So, they do call us and they ask for clarification on a lot of things, all right but as far as any kind of training that we conduct for them – we haven't done any kind of training. (K. Barnes)
- One other thing I'll say to go along with that – any kind of revision that I will put in the Manual, you should have already been notified by Melissa thru a Memo because I can't put it in the Manual if she doesn't put it out there saying 'this is the way it's going to be' – all right. This is new policy and this is how we are going to do this now and this is what you need to do. I can't put this in the Manual until she actually says this is the way it is. Once she makes a change she will send a memo to all the sponsoring organizations and she includes us in on it as well. (K. Barnes)
- My recommendation is to print out all memos with any changes sent to you and incorporate them into your Manual because we won't have a completely new Manual anytime soon. (M. Flores)
- And he is right – there won't be a complete Manual. Once a revision is made it will be made to the applicable section, all right. Now in making that revision everything else behind that needs to be reformatted and yes, you may end up getting an entire new section but whether it's this big or that big what I'll do is what I did this time I made a little sheet with Revision 1 and annotated what each revision was so you wouldn't have to phish thru the whole this to see what the change was. And each one will be labeled Revision 1, Revision 2, and so on and so forth. (K. Barnes)
- And the page that is revised will be dated with the update? (C. Moore)
- Yes, the applicable change – the page that has the revision on it, that will have what the effective date is. It's not going to change the effective date for the entire Manual so this revised date is only for that revised Section, for example: June 1, 2009. The rest of the Manual will remain dated whatever the last Manual update was. (K. Barnes)
- ADE Provider Approval and turnaround time – We have already touched on that.
 - This is for new providers effective 6/1/2009 not existing providers? (C. Reagan)
 - Yes – this goes into effect 6/1/2009 and is effective for "New Providers" not existing providers starting June 1. (K. Barnes)
- The Provider must serve meals to all enrolled children in accordance with Federal Law and USDA Policy and the Provider will serve the same meal to all enrolled children in attendance at no separate charge? So my question would be do they still have to enroll all children? (C. Reagan)
 - The answer to that is 'yes' – all children in attendance must be enrolled. That is stated in Section 226.18(e): Each daycare home must maintain on file documentation of each child's enrollment and must maintain daily records of the number of children in attendance and the number of meals, by type, served to enrolled children. (K. Barnes)
- If a provider has 4 children that she gets paid for by the parents and two that she does not get paid for – Can she claim Breakfast AM and Lunch for the 4 and PM and Supper for the 2?

- Explain this to me – if I can't claim two kids on the menu because they can have the 6 children and only 4 for compensation. This is not a Federal Regulation – this is State. Can we get a list of what is acceptable – We need a lot of clarification so that we know what is acceptable and so that we can all do and say the same to our providers. (K. Curtis)
- If she claims for – Now can she claim those two that are non-comp in the morning – Can she claim them for PM suppers? (K. Curtis)
- I feel what you're saying I may be telling my providers wrong – I need to know because I'm only allowing my providers 4 and they have 6 children. (P. Montgomery)
- As long as you are not claiming “No more than 4 at any given meal” – then you're not over comp. I will re-evaluate and provide a list with instructions. (M. Quintanar)
- A lot of comments made on this issue where we had all attendees talking at the same time – impossible to capture all the comments.
- Okay, I do see a lot of faces out there – I think what Mandy was trying to say is that: As long as you're not claiming “no more than 4 children for a particular meal”. And actually to answer Kay's question – The answer to that is: The 2 can be claimed for PM Snack and so you're saying – If I have 4 children and gets paid for by the parents and 2 that she does not get paid for... Can she claim Breakfast AM and Lunch for the 4 and PM Supper for the 2? Correct – and the answer is “Yes, that the 2 can be claimed for PM Snack and Supper”. This question was actually raised to us Specialists in the Tucson office and the DHS office in Tucson and that is the response that they gave them. If you just want to be sure then I suggest that you contact DHS here and just make sure – but that was the response that I was given in Tucson and right now that is the response that we are rolling with. (K. Barnes)
- Does ADE consider what is said by a Specialist at an Advisory Council Meeting or an Admin Review to be Policy?
 - A specialist at an Advisory Council meeting or during an Admin Review can “only” state what the Department process is and that's what we reiterate. So if like as far as what we are talking about right now – I can't come up with anything new and say this is what policy is. Whatever policy revisions are going to be made, they won't come from me, they won't come from a specialist doing your Admin Review – they are going to come from Melissa. We don't have the authority to and when I say “we” I'm talking about the Specialists – we don't have the authority to create policy whether it's here at these Advisory Council meetings or during an Admin Review, all right. Any policy change and process change and the way we do things won't come from any of us – it will come directly from Melissa. All right and once she makes that change then it will be revised in the Manual. (K. Barnes)
- That's it – now the questions that we just went over again I already gave Teresa a copy, these questions will be included in your minutes along with the responses. So again what you are receiving in Minutes will be what I sat up here and told you all. (K. Barnes)
- Now do I understand that we have 28 days... when do we start counting for new providers? (P. Montgomery)
- What 28 days? From the time that Melissa signs off on the application. (K. Barnes)
- All right we've covered some things and I know that there are some issues that you may not agree with or anything like that. Those of you who want to comment on it further if you want to fill out your Public Participation Comments go ahead and I'll give you a few minutes to fill those out and I'll let you go ahead a speak your peace.

Advisory Council Chair requested Public Participation Request forms.

Public Participation and Closing Remarks:

- Valeda Shivers from BJ Enterprises – Request to Address Advisory Council on the following:
 - Non-Compensation Children
 - Valeda acknowledged that this had already been answered earlier in the meeting.
- Katie O'Neill from BJ Enterprises – Request to Address Advisory Council on the following:
 - ADE Provider Approval: Why the change on the approval process – What spurred this on?

Please note that these additional questions and/or comments were given by membership in participation in response or support of Individual Speakers.

- That I'm not sure – I do know that it's on the Federal Regs what brought it on as to why, honestly I'm not sure. It was brought up to Melissa and I'm not sure whether it was from the recent USDA ME (Management Evaluation) or CCAP (Child Care Assessment Project). I do know that it's something that we have to start enforcing. (K. Barnes)
- We would prefer a signed copy of the signed off Provider Application so that we do not have to call.
- Also the grace period – Memo from Feds specifically addresses only menu errors. I mean the process of getting this back within a grace period is no fault of the providers, no fault of ours, we are doing all we can and timeliness of approvals is a huge concern. And having been doing this for 25 or more years, you know getting approval thru you guys whether it sits on Melissa's desk and Melissa does not get back to us and she does not do anything in a timely manner. The provider is already a month behind with us on getting paid and now we are going to be another month and providers are going to get discouraged because most are under poverty level. It keeps them from getting their money – I think we have to get back to 'why' this program exists and it would really help if the approval date could be the date that the provider had their inspections or the approval date would be the date that they are submitting. There would be less pressure on you guys for the timeliness – I don't think you know/ you understand how many providers you're going to be getting in and the date should be the same date as submitted. DES and DHS use same as their date.
- Do you have something from DHS that they have been approved? (K. Barnes)
- When you call them they say that it's in process. I verbally get and 'okay' everything is in, everything is done and it's just sitting on someone's desk waiting for the certificate.
- How difficult would it be for you to get a written okay faxed to you that they are in good standing. Especially if it's going 11 months – how difficult can that be instead of getting a verbal okay for 11-month? (K. Barnes)
- They don't like to do that. (C. Moore)
- But you would have something in writing until they have that certificate. (K. Barnes)
- Would you accept something in email from DES and DHS?
- Normally they don't give me a letter when I talk to them – they tell me to look at their walk-thru. They give that to the provider and put that in their file and what I do when I see that walk-thru I put it into the system that kicks out every 30 days if I don't have that certificate. I dial that number and ask the caseworker if the certificate is still in process. (P. Montgomery)
- But you have something. (K. Barnes)
- Yes, they give them the walk-thru form. (P. Montgomery)

- Then the walk-thru should be sufficient – especially if it's saying they are okay. (K. Barnes)
- Letter in lieu of DES/DHS license **Or** walk-thru paperwork acceptable. (K. Barnes)
- DES/DHS go past their expiration and are 2-11 months behind. They Retro Date. So if we can start a new provider to date of submittal. When the provider moves – they backdate form and pay back from this date. (A. Hilton)
- Provider has been on the program as a DES home – and their certificate expired and we get call DES and they say we haven't had a chance to issue a new one. And when they do issue the new one they go back and date it with the date that the old license expired. (K. Curtis)
- Nothing is retroactive. There is No Retro on newly certified homes. There is no such thing as retroactive on AA homes – Keep in mind once everything is received if something is missing – if something is lacking. Not a given on retro – All has to be validated and approved.
 - I just spoke to DES regarding your previous question that a DES home was not inspected for 11 months – As far as DES is concerned that House is Not Certified. DES has told me that they don't wait several months much less 11 months or a year to go back and do inspection, if anything after license expiration – they go out within 30 days.
 - I've dealt with homes where applicants failed to submit their applications to DHS and DHS didn't realize that for 30 days. Everyone else in the world may think that it's still certified.
 - It's important that you obtain that certification because you don't what's going on behind the scene. You as sponsors must get proof that home is certified and you must hold provider accountable. (M. Flores)
- How do people know if the provider doesn't tell you that their license has been revoked?
- That's why you have to go straight to the source. (M. Flores)
- Isn't that what Teresa sends over – I look for that in the email. I have one that I just found out that I didn't know about – Sheila went to do a visit and one provider told on the other provider. So we come back and we check but there was nothing in the documentation that told us different and then DES didn't want to talk to us. And I told them I was on the food program and I'm waiting for somebody to call us and in the meanwhile I can't penalize that lady (provider) on hearsay. You know what I'm saying – so if there are phone numbers that you say that we can get to, you give me a couple of good numbers and so I'm not going to be mad at you for that cause I've gotten some good numbers from you... But, we've done all we can do – You know, I don't know nothing else to do. I can't just penalize them from my work. (P. Montgomery)
- I can understand that but what is important is this – you don't have the proof, you've got to get that proof – If it's not in your hands you've got to make it in your hands. Some way or another you got to get this whole thing rolling. And it's a very important role – you are the one that has to hold them accountable and you'll be held accountable for setting the rule. I'll tell you what I can do - I will make it a point to meet with the DES Certificate Unit Supervisor and explain your role and what our role is in respect to monitoring your homes and so forth and I'll look into discussing this stuff with her. Okay, I will do that because I find this a very much misunderstanding with the process. (M. Flores)
- So how do we emphize? If the lady hadn't spilled the suds I wouldn't have known – you see what I'm saying. How do we hold them accountable if that is what they tell us? (P. Montgomery)
- You don't know for the next three years if this home is certified – but what is important is when you do your monitoring visits go see what you find on the monitoring visits. That is the purpose of these monitoring visits – to hold these individuals accountable and verify that everything is in place and that it remains in place – that is the key to the program. (M. Flores)
- All my paperwork is in place so I'm not going to worry about it – but I'm just saying that when we get notification does it come from her when they revoke the license.

(P. Montgomery)

- Okay, all right. I'm not sure about DES – I know we get notification from DHS when a license is being revoked or anything like that. Teresa knows a little about that – go ahead and say what you were saying. (K. Barnes)
- This is in reference to Centers now – my experience is with center applications and DHS licenses – if a DHS license has restrictions on the license the application is returned and if the applicant cannot provide a valid DHS license the application is also returned. We also verify information with other state agencies. (T. McCormack)
- When Michael talks to DES can he request that all of us can probably give him email responses and as they revoke a person that it goes out to all of us in the food program – that would really help us a lot. (P. Montgomery)
- We don't get this from DHS we have no correspondence with DHS and Joe and I found out last month with one of my providers situation. I had no idea that she was not licensed – my license copy said she was licensed until 2010. So we don't have any correspondence with DHS but we do get an occasionally ratification of suspension from DES. (A. Hilton)
- CCR&R – we tried to get that five years ago or whenever and finally we worked it out with CCR&R. But they don't do DHS. (K. O'Neill)
- Years ago we were told that you as ADE had a meeting monthly with DES and DHS and that you discussed providers that were in these issues and then that would come to us but we don't get that information. (A. Hilton)
- And we do – we have what's call a Data Share Meetings ADE/DES/DHS and during these meetings DHS will have a laundry list of Homes or Center where they were fined with civil money penalties, license revoked, license being denied – anything like that. I was under the impression that you guys got that information because we do. I know I've gotten that information from DHS. (K. Barnes)
- Wasn't this supposed to be in place about five years ago and we have asked for it so that we could have a better understanding of what's going on. Do you discuss our seriously deficient providers at these data share meetings with DES and DHS? When we have an issue with a provider from the CACFP side you do discuss that or is it just the other way? (A. Hilton)
- If we have – usually and mostly it's Centers that I'll bring up or Melissa will bring up when we go to these meetings and when there was a Center that we made 'seriously deficient'. I know speaking for myself – I'm not sure about Melissa but speaking for myself – when I've gone to the meetings I've never discussed an AA Home Provider and them being seriously deficient or anything like that. Usually, that information is given to us at those meetings. (K. Barnes)
- I have a 'seriously deficient' provider that we need to talk to DES about and so I wasn't sure if this should go thru ADE – obviously, anyone could call at any time but... (A. Hilton)
- Well, we actually have another data share meeting coming up in about a couple of weeks. This is something that I can definitely bring up when I go there because again, I was under the impression that since we get that information that you guys get it too – okay. I'll bring it up then. (K. Barnes)
- Now the meeting on the 24th – you said that you would request a meeting of sponsors DES and DHS to discuss the compensation issue – Did you request that meeting? (C. Moore)
- I did and it's not happening and it's not because I did request it. As far as I know it just is not going to happen. I can mention it again but nobody has indicated to me that they are going to sit down and discuss this. (K. Barnes)

May 28, 2009

- All right – we probably have time for one more question. The people that are going to do the training are here to set up. Does anybody have any other comments they would like to share? (K. Barnes)
- I do – okay it's mostly comments. Providers incur costs associated with their initial participation Health/ Fire/ Fingerprinting and they should probably be able to claim meals as soon as they have completed their Health/Fire and submission of Fingerprints and sponsors incur costs as well and we need to be able to claim those homes as soon as possible. If, for example – A sponsoring organization thru no fault of their own doesn't have their annual renewal approved by the Department of Education on time by October 1st, they should still be allowed to continue as sponsoring organizations and I just think that precedent should be extended to daycare providers as well. It is going to be really difficult to enroll a new Provider and collect and deposit from them and tell them “we don't know when they can begin participation”. This policy along with the DHS compensation policy is just serving to create more poverty and I'd like to remind everybody that the food program reimbursement is Federal money and it's like an economic stimulus; so by putting people off by three weeks and delaying their participation we are just kind of saying “no” to economic stimulus and it's also the Secretary of Agriculture's role that – No child go hungry by 2015 and I think that some of the policies that are being presented here are counter-productive to that. (C. Moore)
- Anybody else – anybody else? You guys got anything you want to add? Okay.

Meeting concluded at approximately **11:00 a.m.**

Next Advisory Council Meeting:

Tentatively Scheduled for Tuesday, July 28, 2009 – 9:00A-12:00P Conference Room TBD